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## BIB DATA SHEET

CONFIRMATION NO. 7419

<b>SERIAL NUMBER</b> 10/829,042	<b>FILING or 371(c) DATE</b> 04/21/2004 <b>RULE</b>	<b>CLASS</b> 530	<b>GROUP ART UNIT</b> 1652	<b>ATTORNEY DOCKET NO.</b> 43261.00.2001		
<b>APPLICANTS</b> Trevor Barrowcliffe, Potters Bar, UNITED KINGDOM; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0311465.9 05/19/2003 UNITED KINGDOM 0318533.7 08/08/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/26/2004						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>Examiner's Signature</u>		<input checked="" type="checkbox"/> Met after Allowance NYH Initials	<b>STATE OR COUNTRY</b>  UNITED KINGDOM	<b>SHEETS DRAWINGS</b>  3	<b>TOTAL CLAIMS</b>  17	<b>INDEPENDENT CLAIMS</b>  6
<b>ADDRESS</b> Vedder Price P.C. 1633 Broadway, 47th Floor new york, NY 10019 UNITED STATES						
<b>TITLE</b> COMPOSITIONS COMPRISING COAGULATION FACTORS IXA AND VIII FOR THE TREATMENT OF HAEMOPHILIA A OR B						
<b>FILING FEE RECEIVED</b> 1458	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			